PATENT APPLICATION FEE DETERMINATION RECORD

Effective September 30, 2007

Application or Docket Number

10575724

| | | CLAIMS | AS FILED - | PART | i | • | | SMALL EN | ΓΙ Τ Υ . | | OTHER | THAN | |
|--|--|---|--|--------------------------------|--|--------------------------------|-------|---------------------|------------------------|----|----------------------------|------------------------|--|
| | | | (Colum | ın 1) | (Column 2) | | | TYPE | | OR | SMALL ENTITY | | |
| U.S. NATIONAL STAGE FEES | | | · | | | |] | RATE | FEE |] | RATE . | FEE | |
| BASIC FEE | | | SMALL ENT | . = \$ 150 | LARGE ENT. = \$ 300 | |] | BASIC FEE | \$155 | OR | BASIC FEE | \$310 | |
| EXAMINATION FEE | | | Satisfies PCT A (4) = \$50 | , , | All other situations = \$ 100 / \$ 200 | | | EXAM. FEE | \$105 | 1 | EXAM. FEE | \$210 | |
| SEARCH FEE | | | U.S. is ISA = \$ ALL other cor \$ 200 / \$ | untries = | | ther situations = 250 / \$ 500 | | SEARCH FEE | \$205 | | SEARCH FEE | \$410 | |
| FEE | FOR EXTRA S | SPEC. PGS. | min | us 100 = | | /50 = | | X \$ 130 = | | | X \$ 260 = | | |
| тот | AL CHARGEAI | BLE CLAIMS | 5 mi | nus 20 = | * | | | X \$ 2 5 = | , | OR | X \$ 50 = | | |
| INDI | EPENDENT CL | AIMS | | ninus 3 = | * | | | X \$ 105 = | - | OR | X \$ 210 = | | |
| MUL | TIPLE DEPEN | DENT CLAIM PRI | ESENT | | | | | + \$ 185 = | | OR | + \$ 370 = | | |
| * If the difference in column 1 is less than zero, enter "0" in column 2 | | | | | | | | TOTAL | | OR | TOTAL | | |
| CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3) | | | | | | | | SMALL ENTITY | | | OTHER THAN SMALL ENTITY | | |
| AMENDMENT A | | CLAIMS REMAINING AFTER AMENDMENT | | HIGH NUME PREVIC PAID | | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE | |
| | Total | * | Minus | ** | | = | | X \$ 25 = | | OR | X \$ 50 = | | |
| | Independent | * | Minus | *** | | = | | X \$ 100 = | | OR | X \$ 200 = | | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | | + \$ 180 = | | OR | + \$ 360 = | | |
| | | | | | | | | TOTAL ADDIT. FEE | | OR | TOTAL ADDIT. FEE | | |
| | (Column 1) (Column 2) (Column 3) | | | | | | | | | | | • | |
| IDMENT B | | CLAIMS REMAINING AFTER AMENDMENT | | HIGH NUME PREVIC PAID | BER DUSLY | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE | |
| | Total | * | Minus | ** | - | = | | X \$ 25 = | | OR | X \$ 50 = | | |
| AMENDA | Independent | * . | Minus | *** | | = | | X \$ 100 = | | OR | X \$ 200 = | | |
| | FIRST PRES | ENTATION OF M | ULTIPLE DEP | ENDENT (| CLAIM | | | + \$ 180 = | | OR | + \$ 360 = | | |
| TOTAL ADDIT. FEE | | | | | | | | | | OR | TOTAL ADDIT. FEE | | |
| ** | If the "Highest Nu | umn 1 is less than th umber Previously Pai umber Previously Pai | d For IN THIS SI | PACE is less | s than '20 |)', enter "20". | | | · | | | | |
| | | mber Previously Paid | | | | | in th | e appropriate box | in column 1. | | | | |